PRE-CERCLIS SCREENING ASSESSMENT CHECKLIST/DECISION FORM

This checklist can assist the site investigator during the Pre-CERCLIS screening. It will be used to determine whether further steps in the site investigation process are required under CERCLA. Use additional sheets, if necessary.

Checklist Preparer:		Jon Vopata / Environmental Scientist		6/6/2013
_	1.0	(Name/Title)	(8)	(Date)

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(Address)

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(E-Mail Address)

Site Name: Previous Names (if any): Standard Products/West Kellogg

Site Location:

7920 West Kellogg

(Street)

Wichita, Kansas 67209

(City)

Lat/Long: <u>37.673344 -97.433751</u> State LD. #: <u>C2-087-72515</u>

Complete the following checklist.	YES	NO
Does the site already appear in CERCLIS?		X
2. Is the release from products that are part of the structure of, and result in exposure within, residential buildings or businesses or community structures?		X
3. Does the site consist of a release of naturally occurring substances in its unaltered form, or altered solely through naturally occurring processes or phenomena, from a location where it is found naturally?		X
4. Is the release into a public or private drinking water supply due to deterioration of the system through ordinary use?		Х
5. Is some other program actively involved with the site (i.e. another Federal, State, or Tribal program)?		X
6. Are the hazardous substances potentially released at the site regulated under a statutory exclusion (i.e., petroleum, natural gas, natural gas liquids, synthetic gas usable for fuel, normal application of fertilizer, release located in a workplace, naturally occurring, or regulated by the NRC, UMTRCA, or OSHA?		X
7. Are the hazardous substance potentially released at the site excluded by policy considerations (e.g., deferral to RCRA Corrective Action)?		X
8. Does sufficient documentation exist that clearly demonstrates that there is no potential for release that could cause adverse environmental or human health impacts (e.g., valid investigation data showing no release above ARARs, completed removal action, previous HRS score determined, ASTM Phase I, II, etc. completed, approved risk assessment completed)?		х

Date

Please explain all yes answer(s), attach additional sheet if necessi	ıry:	_	_
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Regional LPA Reviewer:		
	Drint Nama/Cianatura	

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State Agency/Tribe: Randolph L. Brown
Print Name/Signature Date